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FEC FORM 1

STATEMENT OF **ORGANIZATION**

RECEIVED

2013 JAN -3 AM 6: 47

							Office Use Only	·	
NAME OF COMMITTEE (in	ı full)	(Check if name is changed)		nple:If typing, type the lines.	. 4 2	FE4M5	IAIL CEN	TTE.IV	
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4. IS THIS STATEM	MENT	NEW (N) OR	>	AMENDED (A	A)		•		
I certify that I have e	examined this St	tatement and the be	st of my	nowledge and beli	ief it is tru	e, correct ar	d_complete.		
Type or Print Name	of Treasurer	Thomas	10	mys)	Thom	nas i	tonv.	210	
Signature of Treasure	er /	homas (far		Date	ノユ	'	201	Š .
NOTE: Submission of		or incomplete information					e penalties of	2 U.S.C. §43	17g.
Office Use Only				For further informati Federal Election Com Toll Free 800-424-953 Local 202-694-1100	nmission		FEC FC (Revised (